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	Substitute for form 1449/PTO	Complete if Known		
	Substitute for form 1445/175	Application Number		
	INFORMATION BIGGI OCUBE	Filing Date		
	INFORMATION DISCLOSURE	First Named Inventor	Levia, K.	
	STATEMENT BY APPLICANT	Art Unit		
	(Use as many sheets as necessary)	Examiner Name		
_	Sheet 1 of 1	Attorney Docket Number	6083P2770	

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Examiner Initials*	Cite No.1	Document Number Publication Date MM-DD-YYYY Number-Kind Code ^{2 (# known)}		Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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